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American-Sino OB/ GYN/ Pediatrics Services (ASOG), Shanghai

Business Plan 2012-16

(CONFIDENTIAL)

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MBA

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Executive Summary

The sincere support from the Management leadership is highly appreciated for providing the fundamental operating information and knowledge on the professional industry technologies.

The business plan analyses the current situation of ASOG, the trends of OB/GYN industry and customers' needs. The results are further narrowed down to frame the mission and vision statements, identify a new strategy, develop and suggest implementing the feasible tactics that will lead the sustainable development.

1. Introduction

The 2012-16 American-Sino OB/GYN/Pediatrics Services (ASOG) Shanghai Branch Business Plan was drafted by Haohong Ding (VP, Senior Marketing Director, ASOG) and Jacob Mathew Valayil (MBA student, University of Nottingham), which was further developed by the CEO, Executive and a broad range of staff at a consultative forum on the 18 July 2012. Since that time, the plan has been reviewed and ready to be approved by the Executive and will structure ASOG's business activities for the five years 2012-16 in the lead up to moving to the New ASOG. The audience of the business plan is:

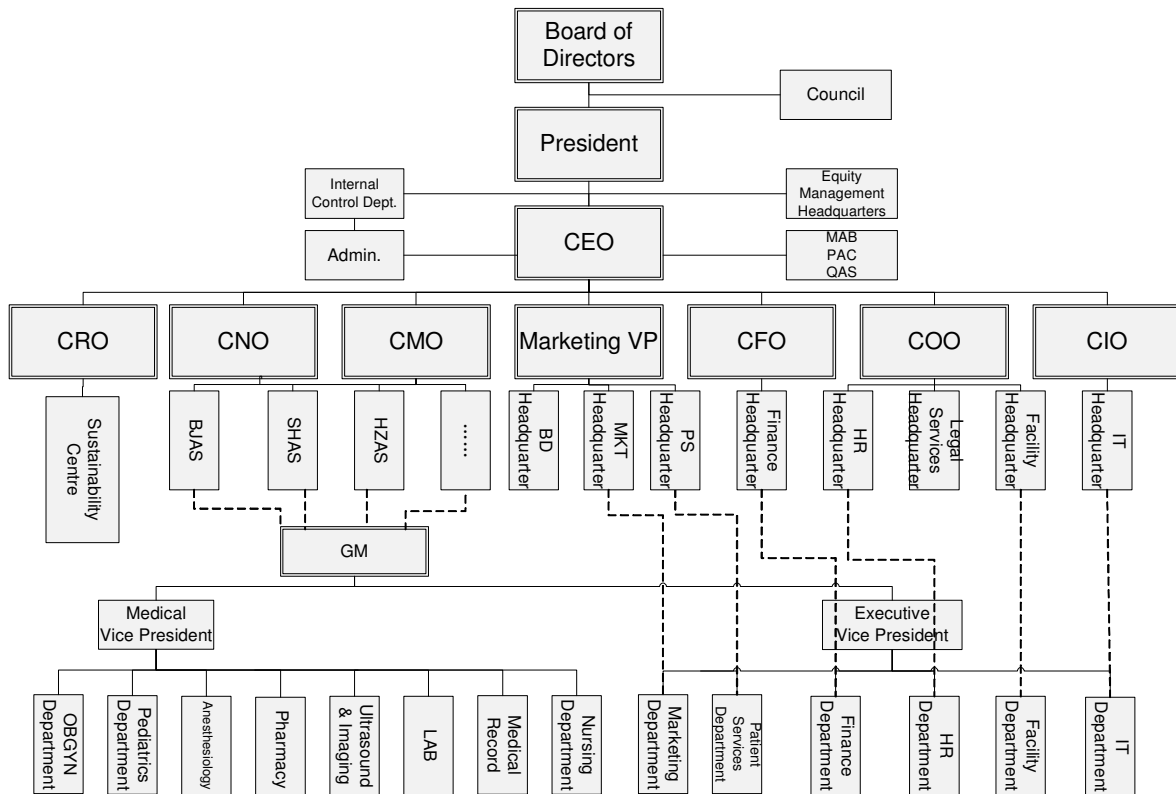
- I American-Sino OB/ GYN/ Pediatrics Board
- I Shanghai ASOG Executive Team
- I Heads of Departments
- I Operation / Business Managers
- I All ASOG (Shanghai) Staffs
- I External Partners

Healthcare is a specific industry and its products and services have characteristics of universality and public. However, the characteristic of public service essentially rules out its commanded-profit orientation. This business plan therefore does not follow the traditional plan's structure that bases on products with marketing as the leading factor, but conducts an

"action to achieve" model as below.

The business plan starts with the executive summary to the Board members and the hospital staff. A General description of the current situations and issues in American-Sino OB/GYN/Pediatrics is discussed. Industry analysis shows the results of a study on the recent trends and regulations in the industry. ASOG Planning Context provides a summary of the new strategic goals and mission for business development. In the 'Action to Achieve' section, an elaboration of different actions mentioned in the 'Planning Context' which is to be carried out as a part of new strategic goals is discussed. The Financial Forecast section shows a summary of the financial forecast for ASOG over the next 6 years with the implementation of new strategic goals.

1.1 Current Organizational Structure



American-Sino OB/GYN/Pediatrics Services, has three hospitals that are located in Beijing, Shanghai, and Hangzhou respectively. ASOG (Hangzhou) was founded in 2011 and will be opened in October 2012; ASOG (Beijing) was acquired from a public hospital three years ago and has been operated one year for trial service. ASOG (Shanghai) is the result of a merger established in 2010 and the business is developing steadily. This plan only researches the business development of ASOG (Shanghai). According to the board's decision, this business plan will be implemented in the ASOG (Beijing) and ASOG (Hangzhou) after this plan will be justified for the development of ASOG (Shanghai).

1.2 American-Sino OB/ GYN/ Pediatrics Services Planning Context

The ASOG (Shanghai) business plan is informed by the ASOG strategic plan 2012-16, which articulates the desired future for the organization.

The strategic plan provides an overview of where this organization wants to go and the business plan provides the detail of how we plan to achieve the objectives of the strategic plan. The 2012-16 business plan may also be referred to as the ASOG's five years "action plan" for the achievement of the ASOG's strategic plan.

Vision

Be the No.1 OB/ GYN healthcare provider in China

Values

To do our best to satisfy people and build a culture promoting welfare

The Strategic Plan for ASOG has 5 strategic goals:

1. Excellence in healthcare
2. Leadership in research and education
3. Focus on quality and safety
4. Focusing new developments in Pediatric Care
5. Improve organizational environment

ASOG Planning Process

The diagram 1 below presents the planning process for ASOG 2012-16.

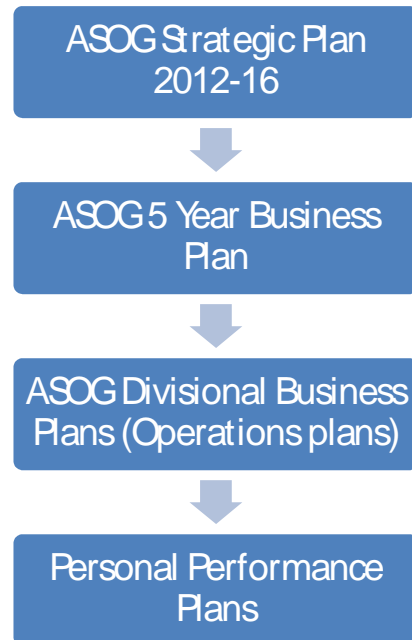


Diagram 1. The Planning Process for ASOG 2012-16

1.3 Reporting progress against ASOG's Business Plan

Reporting against business plans will occur on a quarterly basis. It will be the responsibility of managers to ensure quarterly progress reports are completed for their Division and the overall ASOG shanghai branch business plan.

At the completion of the second quarter (half year mark), all executive manager's will be asked to provide comments on their progress against their business plan and to revise their plans as required. If changes are required to the business plan, the GM of shanghai branch will ratify the changes.

2. The Background of ASOG

2.1 General Descriptions on ASOG

ASOG Shanghai branch was established as the result of a merger in 2010. ASOG provide a comprehensive array of on-site services for women and children by certified specialists from overseas and China. The facilities located in the city center are comfortable and it is equipped with state-of-the-art technology. ASOG is committed to providing quality, compassionate, and personalized healthcare with international standards. The medical staffs are bilingual in English and Chinese.

American-Sino's mission is to provide professional and focused OB/ GYN/ Pediatrics services with a high sense of health care ethics and to become the best choice for people. With 12 obstetric beds, American-Sino is a specialized private hospital which is completely constructed under the U.S. health care standards. ASOG has imported a whole set of advanced U.S health care equipment and adopted JCI hospital management methods and American ways of private doctor services (More information as shown in appendix-1).

2.2 ASOG Core Competences and Strengths

ASOG shanghai branch's development over the last two years, has increased its strengths and core competences. Some of the main strengths of ASOG are listed below.

2.2.1 Offering professional and convenient medical service.

Since its founding, ASOG shanghai branch has devoted themselves to offer a professional and convenience medical services that are distinguished from the public hospitals. The kind of concept can turn the role of patients from passive to active. For example, most of the patients have to follow the schedules of doctors and suffer the queue in a public hospital; but under the new convenience service model, patients can ask physicians to defer to the schedules of patients. In addition, the new service concept strengthens hospital-patient communication to build harmonious relationships and rebuild the credibility of private hospitals in China. Because of the flood of patients, the public hospitals are in a difficult situation and cannot promise the same physician or dedicated team to look after patients from the beginning to the end. To overcome this issue in private hospitals, a specialized medical service team is assigned to

take care of the patients and their family thus building a sense of relationship with the patients' family and the hospital.

2.2.2 A harmonious leadership with a focus on persistent learning

The leadership of ASOG shanghai has a close relationship with the staff, understands their needs and desire for improvement.

The leadership is also open to learn continuously from internal and external sources of knowledge.

2.2.3 Guidance and recommendations from reputed management consultants in healthcare industry

ASOG have established strategic relationship with 'Mayo Clinic' in United States of America which is known as the "Medical Mecca". The clinical logo of Mayo Clinic constitutes three shields, each representing an excellent patient care, education and research. These three perspectives form the foundation for the clinics medical service. ASOG caters to Mayo clinic for expert guidance in improving these three perspectives and aims to become the 'Mayo Clinic of China'.

2.2.4 Presence of veteran leadership in medical service

American-Sino attracts and contracts the most influential specialists of the area. ASOG recently invited Professor Peiru Jiang, who is in charge of Obstetrics Team of China's National Clinical Pharmacology Institution, to join in and lead ASOG

medical team.

2.2.5 Developing brand identity and reputation in the healthcare industry

Even though the corporate business scale is small, ASOG wins a reputation through its professional, convenient, and friendly service.

2.3 ASOG's Challenges

Like all private hospitals, the challenges of ASOG are from both external and internal issues. From the external perspective, the current healthcare policies create a new form of deterrence for developing the private hospital in China. Chinese government implements stringent standards and procedures for private hospitals. Irrespective of the scale of investment or medical skills, the private hospitals have to obtain the hospital trade license through a long and costly review process. If the private hospitals have to offer specialized medical services on OB/GYN/Pediatrics, then these hospitals have to apply for two additional operating licenses. Due to unfavorable scrutiny, in some cases the private hospitals fail to obtain the required licenses or pass for commencement. On the other hand, however small a public hospital may be they can easily obtain all required licenses. To summarize, the regulatory restriction to market access in Chinese OB/GYN healthcare industry is unfair. In

addition, the practice in a public hospital or medical school is considered the only means for the physicians to get the professional recognition in China. If a physician works for a private hospital directly after his graduation, he never qualifies for obtaining professional recognition in China. This kind of phenomenon restricts mobility of talents within Chinese healthcare industry thus leaving the private medical institutes in difficulty of attracting and retaining medical talents.

The internal management issue leaves ASOG to face an enormous survival pressure. The main internal issues of ASOG are listed below.

I Fuzzy internal implementation strategies

ASOG has a long established clear vision, mission, and core value and a team of diligent work force capable to realize this vision. But there is a gap observed between the high end vision and the execution of the proper strategic direction to achieve them. ASOG lacks operational strategy that often serves as a transition of the abstract concepts of vision and mission down to the operational tactics.

I Lack of tactics in improving operational efficiency

The front line staff works towards solving problems passively whenever they get puzzled with problems. ASOG has not designed a systematic framework of tactics which can be used proactively to face challenges.

I Challenges in up gradation of skills for the middle management team

With the development of ASOG, most of middle level managers are found to have inadequate leadership characteristics to handle the growth and the scale of operation. Their strength lies in experience of execution, but requires training in process designing, planning, and risk management.

I Creating a mechanism of internal review and monitoring

In ASOG, only the medical department has a weekly meeting to review and conclude operations. The administration department lacks a mechanism to review the supporting process and monitor the results of implementation.

I Improving internal communication and cooperation

There exist some barriers between the medical department and the administration department. The main barriers are caused by the high specificity of medical service. The administration department cannot readily understand the requirements from the medical department, because the staff of the administration department does not have medical background/understanding.

I Challenges in integrating the experience of newly hired medical experts into the existing routines of hospital operation

For developing the research and teaching, ASOG invited veterans to

lead those areas. These medical experts consider the entrepreneurial leadership team to be less experienced to lead this growing hospital. The entrepreneurial leadership on the other hand does not recognize this issue as a potential conflict and continues the administration of the hospital in their planned direction.

I Increasing customer needs for advanced medical services

Except offering general OB/GYN/Pediatrics medical services, ASOG cannot provide the specialized service due to the licensing requirements or skill shortage in areas such as developing the 'test-tube baby' project or developing dental care services for children in the pediatrics wing.

This business plan seeks to solve these challenges on priority and then create an action plan for ASOG to strive for further development and growth.

3. Analysis of the Women and Children's Healthcare

Industry

3.1 Healthcare System in China

China's current healthcare system is primarily composed of large public non-profit hospitals. These hospitals are supplemented by approximately 4,000 smaller private for-profit hospitals (MOH 2012). China's public medical institutions are generally less sophisticated in their management systems and have a weak organizational structure, simple financial management and limited planning and organizational control. Currently, most public hospitals in China do not have performance monitoring systems and employee engagement initiatives. Moreover, operational principles are different from that found in international hospitals. Therefore their capability to respond to market and social demands is somewhat limited. The healthcare system structure in China is such that they are not sufficiently aware of the need to strive for competitive advantage and quality service. Many medical institutions in China have lower staffing levels and operate at low efficiency than that found in international healthcare organizations. This inefficiency and lack of market responsiveness limits the ability of the hospitals to provide access to affordable quality healthcare (PWC 2011).

The physical environment of these public hospitals is often characterized by inadequate hygiene, non-pleasant service and a lack of privacy. These factors also contribute to the lack of satisfaction among the middle class and high class patients.

Chinese are increasingly demonstrating a preference for imported medicine of higher quality compared to the medicine from the indigenous manufacturers. As incomes rises under a predominantly fee-for-service system, patients with higher purchase power are able to choose more costly private healthcare facilities with foreign collaboration. These private hospitals, most of which are wholly foreign-owned or joint-ventures have the capability of offering the services that affluent patients demand. However, currently they are operating on a small-scale. Few foreign hospitals and joint-venture healthcare facilities have been able to move beyond providing outpatient services and limited inpatient services. An average joint-venture hospital in China has less than 50 beds. As a result, these facilities lack economies of scale as well as economies of scope. This leaves a huge void to meet the increasing healthcare needs of the growing affluent population in China (PWC 2012).

3.2 Women and Children's Healthcare Industry in China

In the Chinese healthcare industry, the women and children's health

care system constitutes of legal regulations to limit and constrain the growth of private healthcare providers. Among all the laws, the two most influential ones are “Maternal and Infant Health Care Law” and “Family-Planning Regulations” which are used to enforce the medical ethics and protect those disadvantaged mothers who are unable to raise/protect their babies. The newborn mortality is one of the standards used by the government to assess the management of private hospitals in this industry. An infant mortality incident can be a major set-back on the reputation of any private hospitals apart from the heavy penalization imposed by the government. As the industry is being supervised strictly, it fully embodies the distinct characteristics that the private women and children’s hospitals shall be held accountable always even without any specific allegations.

In 2010, China’s government issued a comment named “Further Encouragement & Guidance on Social Capital Investment on the Establishment of Medical Institutions”. The ‘No. 58 document’ listed has brought huge investment on the maternity and children healthcare industry. It is a new trend in Obstetrics and Gynecology after a similar policy to attract investments on ophthalmology and dental clinics. Besides this, the family planning policies and rapid growth of the economy stimulated the rapid growth of consumption. With the impact of the market and policies, there opened a chain of national high-end women and

children's hospitals such as United Family, Parkway, and American-Sino.

They mainly aim at providing private medical care adhering to the international standards to the affluent people in China.

3.3 The Shanghai Women's and Children's Industry

The statistical data reported by Shanghai Health Bureau in 2011 shows that there are 84 hospitals with the obstetrics department. The total numbers of the Obstetrics (OB) beds are about 230,000, which in general can meet the needs of the expected 200,000 newborn per year in Shanghai (Shanghai DOH 2012). All in all, the public women and children's hospital represented by 'Shanghai No. 1 Maternity and Child Health Hospital', 'Gynecologic and Obstetric Hospital Affiliated to Fudan University', 'International Peace Maternity & Child Health Hospital of the China Welfare Institute', 'Shanghai No 6 People's Hospital affiliated to Shanghai Jiaotong University', 'Shanghai Oriental Hospital' and the private hospital represented by 'United Family', 'Parkway' and 'American-Sino' are dominating Shanghai's high-end market of maternity and child care.

4. The ASOG Planning Context

4.1 New Strategy

Based on the ASOG's challenges and integrating the vision and mission, ASOG will announce the new strategy: **To be the women and children's health assistant**, which embodies the spirit of the core value: To do the best to satisfy people and build a culture promoting welfare. The patient health assistant model developed in the new process not only offers professional medical service in the hospital, but also cares about health of patients and provides healthcare advices for patients in their daily life. Thus, this patient oriented service makes patient walk into the hospital positively and voluntarily. In addition, the new service model engaged in word-of-mouth will attract more and more physicians and medical talents join and work with ASOG.

4.2 5 Strategic Goals of the Strategic Plan

1. Excellence in healthcare

To improve the patient satisfaction by improving efficiency in each operations like discharge planning, continuous reviewing of service models and efficient monitoring of the service outcomes.

2. Leadership in research and education

To develop the clinical research and cooperate with the leading

medical schools to train and upgrade the next generation medical talents.

3. Focus on quality and safety

To control the medical accidents through perfecting the quality control system.

4. Focusing new developments in Pediatric Care

Invest and develop the children-care project on adapting to new market needs.

5. Improve organizational environment

Improve the organizational environment with the help of the new service model.

5. Actions to Achieve the New Strategic Goals

5.1 Excellence in Healthcare

We have three courses of action to achieve “Excellence in Healthcare”, they are “reorganization of the service structure”, leverage the “*patient-oriented*” operation system, and form a “*process management system and work procedures*” based on defined organizational rules and procedures.

5.1.1 Re-organization of the service structure

The current organization chart was built according to the traditional supporting mechanism. When patient’s walks into the hospital, physicians offer services to them. The administration staffs build a supporting platform to support physicians. However, this service model serves patients passively, such as, waiting for patients walking in, trying to find a solution when the wards are crowded. Moreover, this model causes communication barriers between functional departments and decreases operational efficiency. Thus, it is necessary to restructure this organization chart and build a new service model. According to the new service concept, we design a new organization chart as below to serve patients and make patients enjoy their hospital experience.

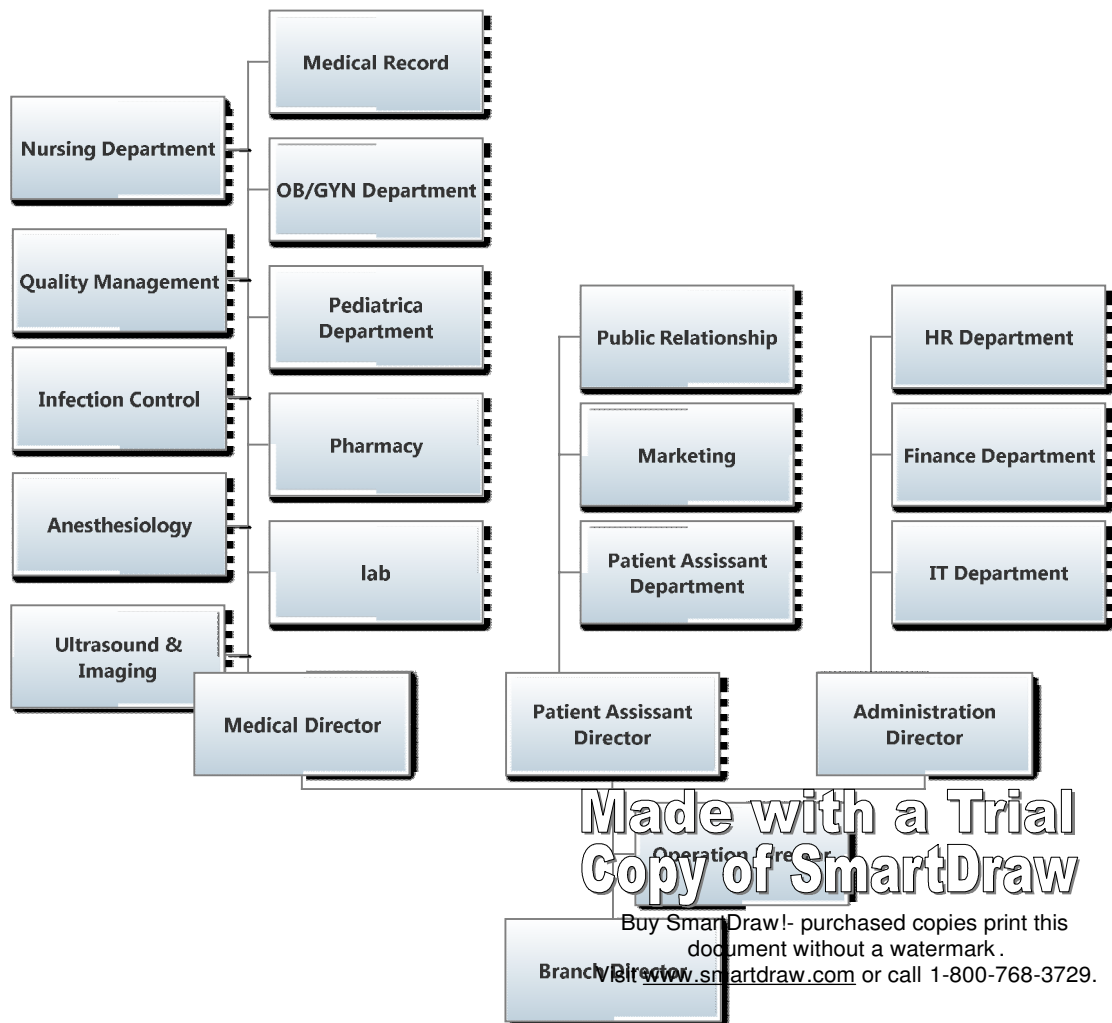


Diagram2. The New Organization Chart (Shanghai ASOG)

This new organization chart (see diagram2.) sets a new position for Operations Director, who must act independently to provide crisis management, interpret policies, make timely decisions that directly impact patient care, ensure effective communication and collaboration among departments and provide operational oversight throughout the Hospital. Under the Operations Director, a new data analysis team will be set. This team will collaborate with every department to collect all kinds of data and carry out research and analysis. The secretary or

assistant of each department will collect and statistics data based on a weekly, monthly, quarterly and yearly basis according to requirements of the data analysis team, such as the patient satisfaction rate. The data analysis team then organizes and analyzes the collected data according to the performance monitoring needs specified by the management board. In this process, the main indicators will be monitored such as number of inpatients and outpatients, delivery number, the new delivery forecast in the next week, month, and quarter, quality controlling index, etc. This new department will improve operational efficiency, report performance information's and evidences to the management board to make the right decision, and make staffs recognize their current performance and identify the areas for further improvement.

This new organization chart retains the medical department's structure according to the NIAHO quality control system, and separates the administration department into two supporting department. They are the 'patient assistant' department and the 'administration' department. In this new structure the 'patient assistant' department will replace the existing 'service' department'. In addition, the existing 'marketing department' and 'public relation department' are incorporated into 'patient assistant department' as the new 'marketing team' and 'public relation team'. Patient assistant department offers reservation, customer complaints and patients review. In addition, they

also take responsibilities for marketing and brand development. Marketing team concentrates emotional energy on brand expansion and reduces the investment on promotions. Public relationship team seeks to design emergency response plan in case of medical accident, building a reliable relationship with government and collaborating with the media to lead public opinion. Moreover, marketing team should collaborate with public relationship team to get all kind of operational licenses to expand business in the healthcare industry. This will help ASOG overcome the current troubles associated with the restrictions in obtaining specialized licenses.

The main change of the administration department is to promote an experienced staff as an administration service specialist, who will act as the interface of administration department. The administration service specialist in each department coordinates the requirements of staff of that department and interacts with the various administration sections to support the needs of each medical staff. For example, when physicians needs to go to Harvard Medical School to attend an academic forum, the administrative service specialist will prepare the visa document, travel tickets, hotel booking, the travel plan, and everything this physician requires for his transit. The physicians do not need to ask every supporting team for each requirements and is able to devote him to his core job which is providing quality medical service to the patients.

Thus, the new marketing and public relationship team take ASOG's root deeply in the local government's shelter. From the service structure, we build the "patient assistant" service model to epitomize the core value of "patient-orientation"; on the other hand the "administration specialist" internal supporting model makes staffs feel a sense of belonging and reliability. Operation department leverages resources to direct and support the administrative departments and medical departments, and integrates those two major departments into an 'organic-whole system'. In addition, the data and context analysis team monitors the business environment to support the management board.

5.1.2 Leverage the "patient-oriented" operation system

After effective organizational restructuring, ASOG will focus its efforts on leveraging the patient oriented operation system. The chapter explains how "patient-oriented" operation system will function based on the new service model.

Whenever a patient walks-in to ASOG, the patient will be assigned to a specific assistant, who helps the patient make an appointment with the corresponding physician, explain prescription, and monitor the progress of the treatment. When the patient is in hospital for specific treatment, the assigned assistant should take care about the non-medical requirements from the patient as-well and make their stay as convenient

as possible. The advices of treatment or care will be offered by the service assistant to recovered patients after they are discharged from the hospital. After the patient fully recovers, the assigned patient assistant monitors and reviews the patient's health situation at regular intervals for a specified period. With proper guidance in implementation and sufficient time for building relationships, this 'specific assistant' service model will attract people to get more associated with ASOG in the long run.

5.1.3 Form a process management system and work procedures based on defined organizational rules and procedures.

During last financial year there arose a conflict between the medical team and senior executive team in ASOG (Beijing). In the further investigation, the responsibility for this failure was found with the branch director, who led the team based on his personal bias and not according to rules and policies of ASOG. As a result, it is found essential to strengthen the policies management for the stability of the business to aid business expansion and growth. Building "patient-oriented" services and supporting systems will reflect the core values of ASOG. In ASOG's culture, the top priority is given to patient care, followed by the development of medical skills and finally the development of employees.

Finally, ASOG should attain the financial targets to sustain its growth and achieve its vision.

As a knowledge-intensive enterprise, ASOG should build a talent development mechanism to position right people for the right job, such as, adopting meticulous hiring, training and staff retention policies.

ASOG has to build a “review and monitoring” mechanism that is able to regulate the executive team and monitor the whole operation. This can be achieved by following a balanced scorecard system specific to ASOG.

5.2 Leadership in Research and Education

According to the definition given by Mayo Clinic a hospital should include research and education as its core function apart from offering excellent medical service. Most of Chinese private hospitals are not doing well in research and education due to the limitation of investments and government policies. However, it's time that private hospitals in China have to ask themselves 'what can we offer to patients besides a 'warm smile' (pleasant service)?' 'How can we be different?'. The answer lies in investments for research and education which will offer greater excellence.

From the hospital's perspective, ASOG should position itself as a center of clinical study in obstetrics and gynecology, such as in non-invasive prenatal diagnosis. Thus when patients associate with ASOG, they envision ASOG not only in offering exceptional services, but also as a medical leader or expert in the industry.

Moreover, the leadership team of the medical department should collect and analyze all kinds of developments on OB/GYN/Pediatrics and communicate with the physicians' team to build the research frameworks and formulate individual research directions. Only when the physicians get research achievements on the study will ASOG attain academic excellence. In addition, ASOG should vigorously create opportunities for the

development of physicians. ASOG should collaborate with the famous OB/GYN associations and medical periodicals, and encourage doctors and nurses to share and interact for effective knowledge transfer.

The management should work with human resource department and set up a system of rewards on the clinical research and ensure proper implementation of this initiative. In addition, for regulating and monitoring the initiative's process, setting a monthly reporting to review the research progress is necessary.

Finally, ASOG should communicate with medical schools, such as, Fudan university medical school, Jiaotong university medical school, and Tongji university medical school, offer internship opportunities to MD and PHD for developing talent reserve.

5.3 Focus on Quality and Safety

Quality and safety is always the eternal and sacred theme in a hospital. This should not be a mere empty bragging or slogan in ASOG but should be implemented seriously. As to the public hospital, clinical incidents are happening very often. They in-turn pays compensation to patients or their families because most of the patients have no other choice. However, clinical incidents will tarnish the reputation, if it happened in the private hospital.

ASOG should commence forming an annual quality and safety plan,

which combines many indicators of quality control. At regular intervals the quality team can monitor the index, set benchmarking and then find the improvement solution. Currently, the sincere effort of attending in-charge improves the quality and benefit of service. However the current practice cannot be marked as flawless. Implementing the new service system can support the front-line physicians to reduce medical risks. Collaborating with the specialized hospitals in Shanghai and establishing an emergency transfer consultation mechanism should be incorporated into the new service scheme. Furthermore, the medical team should work with the public relationship team and design an emergency plan to deal with media and public. Once the strategic reorganization is implemented and the system is mature, ASOG should fully implement the NIAHO medical quality standard and mechanism, which can improve the current point-to-point quality control system and replace the systematic quality and safety control mechanism.

5.4 Invest and develop the children-care project

In the past years, ASOG had invested more money and energy to develop OB/GYN services, but the hospital is still in the preliminary stage about developing pediatrics. From the recent research in this industry it is understood that many young parents look for a high quality medical services with exceptional physical environment. In an interview with the

physicians of public hospitals it is known that public hospitals are planning to cancel pediatrics department because the benefit of pediatrics is smaller compared to other departments and pediatrics carry high medical risks. ASOG cannot operate the emergency service of pediatrics due to high risks, but ASOG can develop the healthcare medical service including the following aspects: developing the children's periodic inspection project and concentrating on the dental care for children project. With improved reputation in Obstetrics and Gynecology it is anticipated that ASOG can take this opportunity to capture a good portion of the market share. Most of young parents do not know how to maintain the physical and mental health of children. ASOG can offer lectures of child psychology, children nutrition, and attention deficit and hyperactivity disorder (ADHD) to improve the awareness of parents.

5.5 Improved Organizational Environment

Current functional organization structure is found to be bureaucratic and inefficient. So a partial reconfiguration of the organizational structure is found to be essential to improve the performance and align the activities of the operating staff with the long-term strategic vision of ASOG. This will be followed by adopting stringent performance monitoring systems and milestones. Actions are planned to improve the communication procedures and develop a culture of cooperation within the hospital. The

new 'ICT 5 year strategic plan' will constitute of several stage wise implementation of latest IT technology system to improve the business performance and customer service factors.

ASOG should foster a culture of continuous improvement to recognize where achievements are celebrated, and learning's shared. The Press Ganey Survey, an efficient and effective evaluative system, should be implemented. The 'Press Ganey Survey' can help the hospital take a keen understanding of the organization from top to bottom, which also covers clinical performance, operational performance, partnership performance, satisfaction performance, and strategic planning & marketing performance (Ganey 2012). ASOG can recognize inadequacies and plan to bridge this gap continually.

Besides this system, ASOG should set a quarterly workshop. On one hand, the management team can brief the achievements in the last quarter and plan for the next quarter and also accept surveillance by the masses. On the other hand, every department can find their inadequacies or communication barriers between different departments by group discussions and find a solution for their issues. In this workshop, the management should consider awarding the individuals or group of staff for their splendid achievements to encourage the participation from the other staffs.

6. The Key Initiatives to Support the Business Plan

Below mentioned are the key initiatives which ASOG should design to support the Business plan.

- n Communication Plan
- n Market access plan for service advancements
- n Budgeting, Operational efficiency & effectiveness Plan
- n Organizational transformation and redesign plan
- n Workforce management plan
- n Quality and Safety Plan
- n ICT Plan
- n Research and Education Plans

7. Financial Forecast for the Business Plan

The strategic initiatives framed as a part of the business plan will enhance the customer experience and ensure that more customers will come to ASOG in pursuit of high quality specialty treatments in the coming years. To cater to the increasing number of customers, ASOG should develop sufficient facilities and infrastructure to offer quality medical care in line with customer expectation. A need for increasing the operational capacity was identified to meet the increasing demand from the customers. So an increase in the operational capacity of the hospital is incorporated into the business plan. The first stage of business expansion will increase the operational capacity to two times the existing facility and the second stage will plan an increase in operational capacity to approximately 7.5 times the existing capacity. The increase in the operational capacity is planned as shown below.

2011-2017 Increase in operating capacity							
Year	2011	2012	2013	2014	2015	2016	2017
Number of Beds	12	24	24	90	90	90	90

A financial forecast is prepared in consultation with the Senior Executives of ASOG based on the new strategic initiatives and the business expansion plan. The horizon of the financial forecast is decided to be six years from 2012-2017. The time horizon is limited to six years as the strategic initiatives under the business plan can be totally implemented in these duration and business direction has to be reviewed and revised in 2017 according to some of the expected socio-economic changes mentioned below.

- n Statistics of the birth rate and fertility rates.
- n Successful introduction of the public specialty care services targeting affluent population in China.
- n Increase in the hospital brand value and patient in-flow.
- n Government policies for population regulation.
- n Competition from other private hospitals.

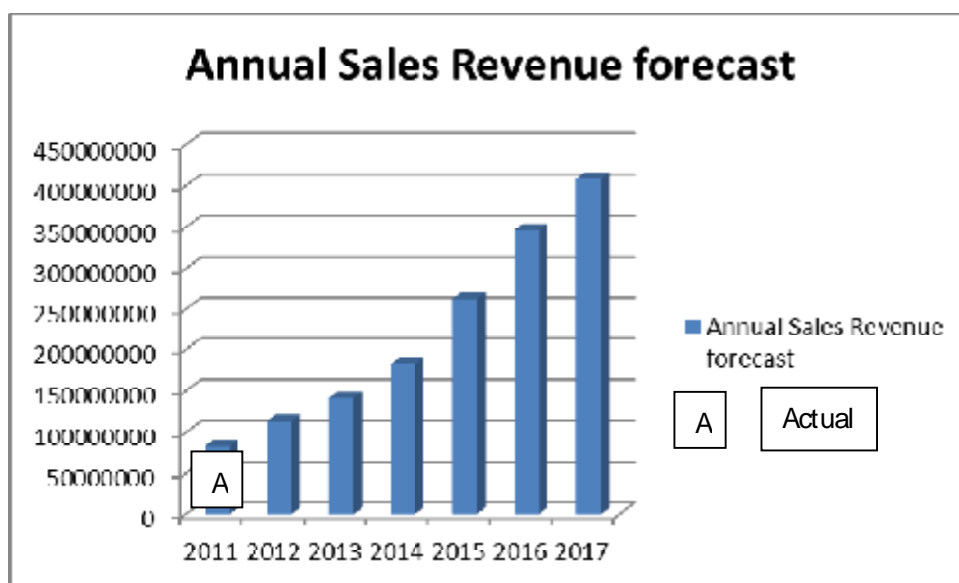
The financial forecast is based on the anticipated % sales increase in each year depending on the predicted customer inflow as a part of new strategic initiatives of improving customer experience and excellence in healthcare. The predicted customer in-flow is mentioned in the chart shown below. The chart has been prepared in consultation with the Senior Executive of ASOG after analyzing the current business plan and market situations.

2011-2017 Increase in operating capacity							
Year	2011	2012	2013	2014	2015	2016	2017
Number of Beds	12	24	24	90	90	90	90
Outpatient Number	27554	30,000	32,000	40,000	60,000	80,000	90,000
Delivery Number	618	1,200	1,700	2,300	3,100	4,200	4,950

While the current operational capacity of ASOG is 12 beds in total, initiatives have already begun based on the business expansion plan to increase the operational capacity to 24 beds which will be in service by the fourth quadrant of 2012. Initial investments have been released for the new strategic initiatives based on the funding requirements mentioned in this financial forecast to initiate the new strategic reorientation. As the brand value and customer demand expands, a second stage of capacity expansion is planned to be in service by the beginning of 2014.

7.1 Financial Forecast – Sales revenue

As a result of implementing the new strategic initiatives and business expansion plan, the annual sales revenue is expected to increase from 83million RMB to 408million RMB in 2017. The year-to-year sales revenue is expected to increase on an average rate of 32% till 2016. As the hospitals reaches 80% of its utility rate by 2016, the growth rate in 2017 is restricted to 18% by which ASOG will attain its maximum utilization capacity unless a third phase of business expansion is planned. A chart depicting the annual sales forecast from 2012 to 2017 is shown in below.



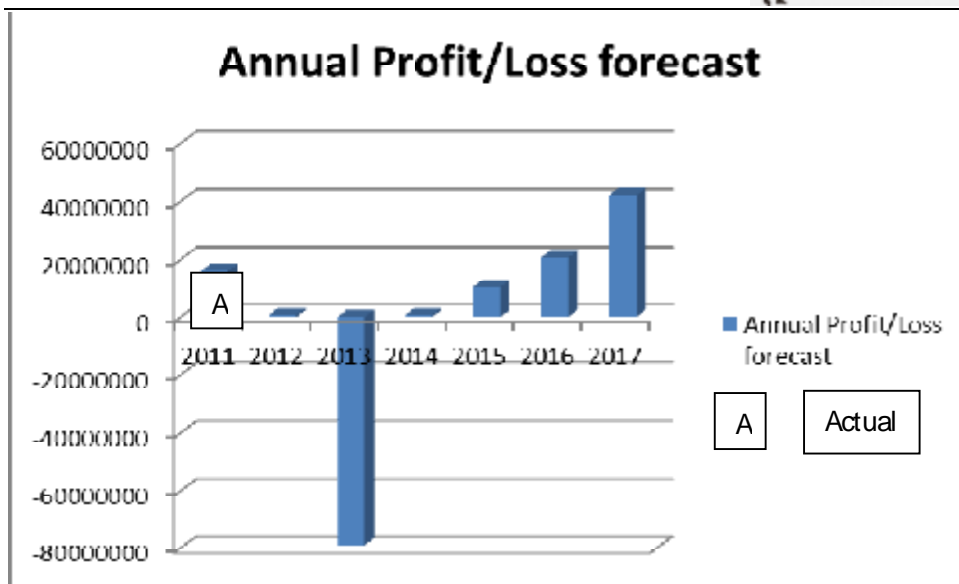
Summary of Financial Forecast 2011-2017

Year	2011 (Actual)	2012	2013	2014	2015	2016	2017
Sales Revenue	83,054,633	¥112,954,301	¥141,192,876	¥182,138,810	¥262,279,886	¥346,209,449	¥408,527,150
Net Profit	16,110,438	¥766,951	- ¥78,990,612	¥808,318	¥10,513,978	¥20,678,451	¥42,115,495

The detailed financial forecast is mentioned in the appendix-2.

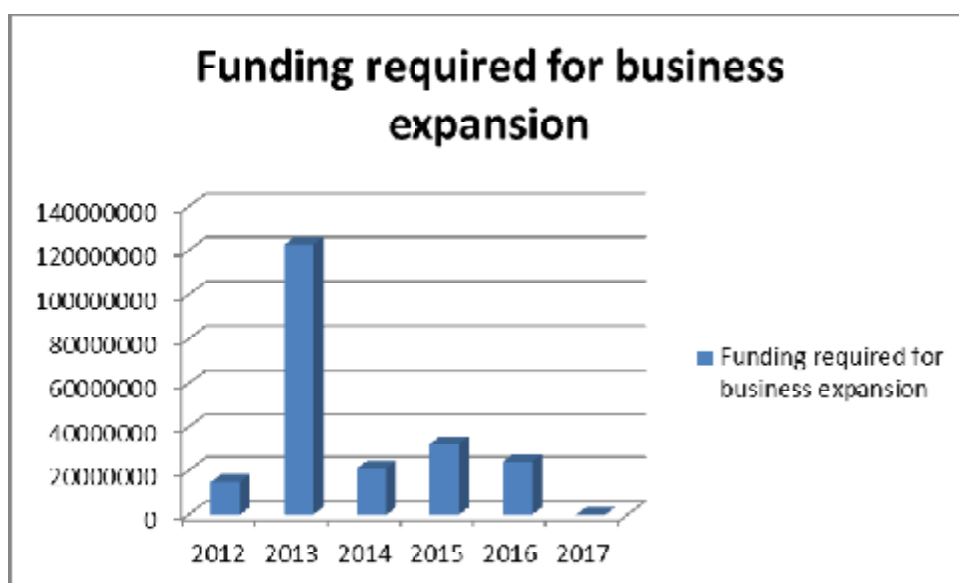
7.2 Financial Forecast – Profit and Loss

As the main intention of the business plan is to create a strong base of core values and procedures which will act as a foundation for building a brand value for ASOG in the healthcare industry, the profitability in the short term is not considered as an main criterion in this business plan. The current business plan concentrates on increasing the profitability of the hospital in the long run thus creating a sustainable business model. The high investments in developing the facilities and operational capacities of the hospital combined with the additional cost incurred in the strategic initiatives to improve the customer experience, pulls down the profit level in the years from 2012 to 2015 even below the current profit level in 2011. In 2013 due to very high investment in developing a new operational facility with 90 beds, the hospital will account a loss of 78million RMB. However this will lead to increased revenues in the following years and improved profits from the year 2016. The profit forecast from 2012 to 2017 is as shown below.



7.3 Funding requirements for business expansion

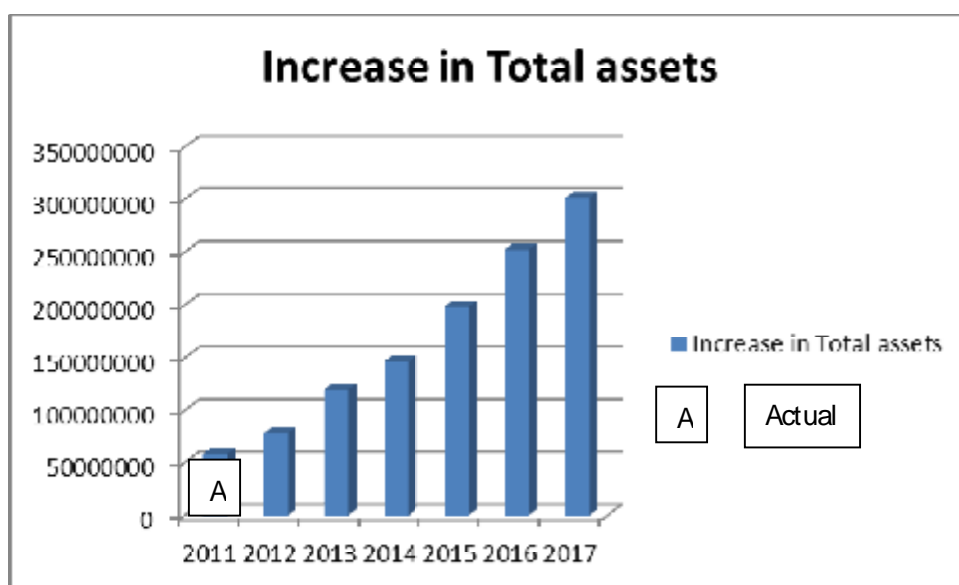
The investment needs or the additional funding required for the business plan is calculated from the financial forecast and the results are summarized in the chart shown below. The total investment required for the business expansion and value creation is 214million RMB which is divided into investment needs per year as shown in the chart.



As the ASOG Business group holds an account reserve of 200 million for investments, it is identified that the investment needs till 2015 can be met from this account with prior approval from the management. The final round of investment accounting to 24million can be catered from the sale of stocks, as the Hospital plans to release its first public offering in 2016. This public offering will also aid to generate more finance for future business growth. As the funding obtained from the stock sales will be reinvested for further business expansions, ASOG ensures the returns to the investors in terms of consistent share value appreciation each year.

7.4 Investment Analysis

The increase in the total assets for ASOG from 2012 to 2017 is forecasted and shown below. The total assets are predicted to increase from 58million RMB in 2011 to 301million in 2017.

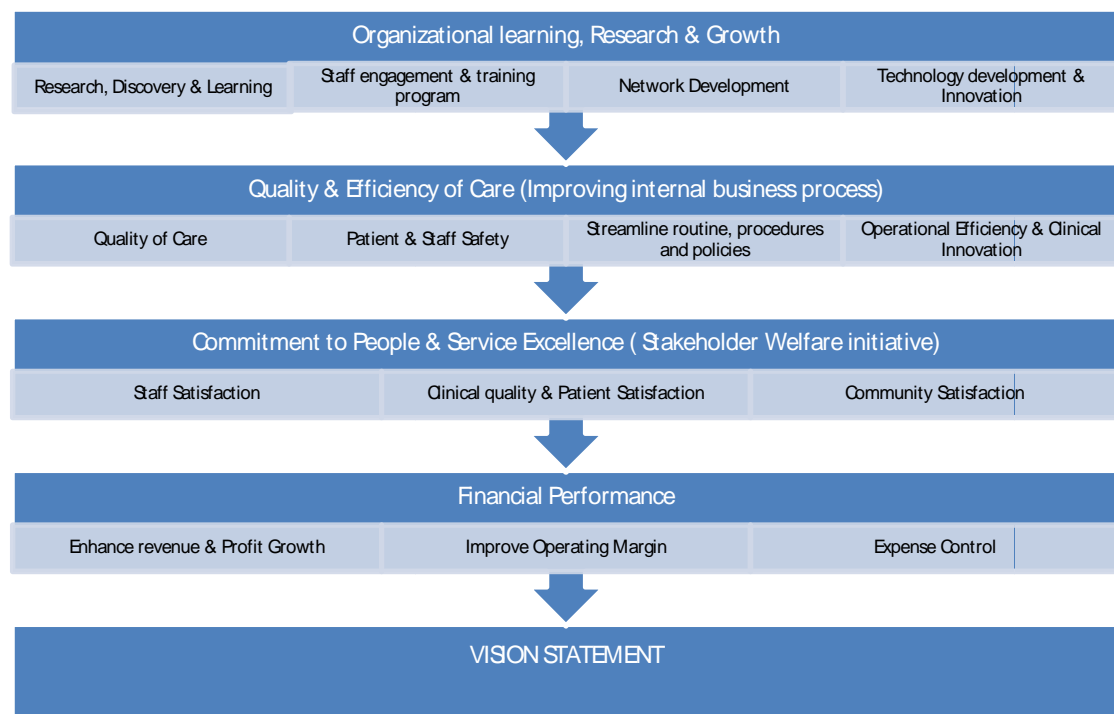


The return on Capital employed (ROCE) has been calculated for the business plan and found to be increasing from 2014. The summary of the ROCE for the period from 2012-17 is shown below. It is observed that the ROCE is increasing over the years which show a favorable growth in the business.

ROCE (Return on Capital Employed)					
2012	2013	2014	2015	2016	2017
1.25%	-75.34%	0.64%	6.21%	9.66%	16.44%

7.5 Monitoring and Controlling of Financial Performance

To ensure proper working of the strategic initiatives and to align the departmental goals with the overall financial performance and to achieve the underlying business vision, an implementation and performance monitoring system using balanced scorecard will be adopted in ASOG. The outline of the suggested balanced scorecard system is as shown below.



The new 'Data analysis team' under the supervision of Operations Director will collect the reports on the key performance indicators from various functional departments in each of the five perspectives mentioned in the scorecard. These reports are then analyzed to monitor the performance against the forecasts and highlights of the analysis will be forwarded to the Senior Management for review.

8. Conclusion

The main intent behind the business plan is to create an innovative healthcare system which carries the customer experience to the newer heights. Implementation of strategic initiatives mentioned in this business plan will prove increasing the brand value of ASOG in the Chinese Obstetrics, Gynecology & Pediatrics healthcare industry, thus ensuring consistent returns to the investors. This will enable ASOG to realize the aim to become the No.1 OB/Gyn healthcare provider in China as mentioned in its vision statement.

With increasing economic growth and improving purchasing power of people in China, more people demands convenient and quality healthcare services. This when combined with the inability of public hospitals to provide convenient services to a wide mass currently covered by them opens-up enormous opportunities for ASOG's business expansion according to the new strategic plans. ASOG aims at serving the healthcare needs of affluent people and the rising middle class in Shanghai.

The business plan for expansion can be executed with a start-up capital of 13.8million RMB in 2012. The total investment required for business expansion over the next five year is 213million RMB. This investment aids the strategic initiative which ensures an increase in the total assets of ASOG from 58million in 2011 to 301million RMB in 2017. Following sales

projections, ASOG aims to grow at an average rate of 32% each year over the next five years. The initial phase of investments during the first four years of expansion which sums to 189million RMB is expected from the account reserves of ASOG business group. The last phase of investment which makes to 24million RMB is expected from the sales of stock in the first public offering of ASOG in 2016.

Over the past years, ASOG has gained a reputation of offering professional and convenient medical service under a dynamic leadership team. Currently, the presence of highly recognized medical experts and the strong industry links with the leading medical research institutions in different countries provides ASOG a leading edge compared to its competitors. These factors offer the opportunity for the prospective investors, the reputation and pride of being an integral part of a revolutionary growth targeted by ASOG in the specialty healthcare sector in China.

9. References

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10. Appendix

10.1 Appendix-1 – An overview on the current state of ASOG Shanghai

1. Introduction of American-Sino OB/ GYN/ Pediatrics Services

American-Sino's mission is to provide professional and focused OB/GYN/Pediatrics services with high sense of health care ethics, and to become the only best choice for people. With 12 obstetric beds, American-Sino is a specialized private hospital conveniently located in the middle area of Shanghai Embassy district which is known as medical resources center. As the only hospital completely constructed under the U.S. health care standards, American-Sino has adopted a whole set of advanced U.S health care equipment, and follows JCI hospital management methods and American ways of private doctor services.

American-Sino was established with a merger in 2010 through a partnership of New Life Ob/Gyn Group, LLP and Huashan Hospital affiliated to Fudan University. It provides a comprehensive array of on-site scientific, professional, excellent, comfortable services for customers by certified specialists from American OB/GYN Doctors Association and specialized-training nurses. There is an experienced team of medical staffs in American-Sino. All the doctors are trained professionally, some with over

10 years of working experience in Ob/Gyn and pediatrics. Most of the doctors are trained in the United State. With the western education background, the doctors understand the differences between Chinese and Western cultures, and safeguard the rights of patients and keep patients' privacy strictly confidential. In addition to doctors, nurses are also bilingual in English and Chinese, providing patients with the highest quality of services and outstanding medical care.

As the leading medical provider in newborn health care, American-Sino has a health care team of 8 clinical Ob/Gyn doctors, 6 pediatricians, 4 resident Ob/Gyn doctors, 5 neonatal doctors and 54 nurses. In general, there are 24,000 outpatient services and nearly 1,000 baby deliveries per year. In addition to the high quality of neonatal services, American-Sino is also specialized in women's and children's health care. In the partnership with DET NORSKE VERITAS, American-Sino aims to build a sustainable developing service center for women's and children's health care.

2. Strategic Structure

Following the core set of strategic structure, American-Sino has always followed three principles. First, strategic future—map and route. Where is the destination? How to get it? Second, values—helping itself by helping the society first. American-Sino will gain after getting recognition Third,

resources—human resources. To build an effective mechanism for attracting, developing and keeping the talent.

American-Sino's strategic planning includes hospital positioning, capital strategy, product strategy, marketing strategy and human resources management. Based on the same managing concepts, American-Sino together with its strategic investors aspire to become an international women's and children's hospital, operating under the advanced health care management and providing expatriates and affluent families in Shanghai or surrounding areas with the personalized and professional health care services. American-Sino's target customer is the group of expatriates and affluent families in Shanghai area. It aims to build a branding strategy in excellent service experience. In the aspect of medical technology, American-Sino cooperates with Harvard Medical School and Mayo Clinic, studying the advanced foreign technologies in Ob/Gyn/Pediatrics, and referring to the domestic patients' cases to find the health care services suitable for Chinese patients. In addition, American-Sino attracts the talent at home and abroad to join in, making them be the powerful forces of the team by specialized training. Talent reserving work can also be prepared by strengthening cooperation with the medical schools.

3. Comprehensive Management of Medical Services

Mayo Clinic, known as "Medical Mecca", is famous over the world by

providing medical services to patients. As is evidenced by the Mayo Clinic logo, the institution has a three part focus. First and primary to the organization is the patient care practice, represented by the central shield. The other two shields represent the areas of education and research, two areas of Mayo Clinic which have become more prominent over time.

American-Sino provides systematic medical services to the specific customer group with high quality and builds good relationship with them. However, in addition to excellent services and comfortable environment, there are no other outstanding advantages compared with the other competitors, i.e. no systematic medical education for talents reserve support or no scientific research as support for the sustainable innovation. In the aspect of medical service skills, American-Sino has no fixed positioning, without its own characteristics of medical services. However, in addition to the medical standards set by JCAHO, American-Sino is operating under the standard of NAHALE set by DNV for building a sustainable developing medical center.

American-Sino's medical quality control includes fundamental quality, link quality and final quality, among which link quality control is the most important as it connects with and interacts with the other two during the whole medical process. In the aspect of fundamental medical quality control, American-Sino attracts and contracts the most reputed specialists in the

area of OB/Gyn. An example is inviting Professor Peiru Jiang, who is in charge of Obstetrics Team of China's National Clinical Pharmacology Institution, to join in and lead AS medical team. In the cooperative relationship with Huashan Hospital, American-Sino can get access to their advanced medical equipment, and through budgeting, the medical procurement quality can also be effectively ensured. The link quality control includes the management from outpatient to inpatient service, diagnosis, materials, curative effect evaluation and discharge. American-Sino has improved the appraisal system of quality management changing the responsibilities from the attending doctors to the four-grade medical team. Also, it adopts clinical pathway, evidence-based medicine and JCAHO standards, which have strengthened the standardized management on rules & regulations formulation and process evaluation and kept improving quality work. In the aspect of final quality control, American-Sino has not yet established its database for comprehensively evaluating the advantages and disadvantages of final medical results.

American-Sino adopts a relatively less perfect self-assessment system for periodic evaluation. It mainly constitutes medical quality, medical complaints and medical quantity. ASOG spares no effort in developing medical quality and monitoring investment. Internally, it relies on monitoring customer's complaint rate; externally, hiring a professional

medical advisory company for getting the improvement on medical quality.

American-Sino has arrangements with a number of insurance companies, providing convenient services for expatriates and affluent families. As an effective complement to government health care system, it enjoys the same services of green path for referring patients who are in critical conditions timely to Shanghai specialized hospitals. However, American-Sino has not yet developed a set of effective internal and external environment monitoring system, which could monitor the change of patient structure, emergence of new medical technology and the change of macro-economy etc.

4. Operation Management

American-Sino has initially established its operation mode, which is focused on serving medical team. Its strategic direction and logistic department shall give maximum support to medical team, optimizing medical processes as the first priority.

In the process design, American-Sino clinic operates under the U.S women's and children's clinic design standard and JCI process design. Through appointment booking, the average waiting time for pediatric outpatient service is about 12 minutes while that of the Ob/Gyn outpatient service is about 8 minutes. With only 12 beds, American-Sino effectively reduces the average length of stays to 3 days through high quality of nursing services

and cooperation with a confined club. However, due to the lack of comprehensive data collection and analysis on labour patients, American-Sino cannot systematically predict the delivery and hospitalization number of newborn. Therefore, the operation of inpatient department is in a passive state.

In the construction of supply chain, American-Sino tries to choose relatively fixed drugs and medical consumption goods, and increases the procurement number. Besides, it compares prices with 4-5 fixed supply agencies for reducing the cost of procurement, and ensures that the goods could be delivered within one or two days. Additionally, American-Sino implements regular budgeting and auditing system, effectively making full use of the cost and resources.

In the aspect of the cooperation with each department, the lack of unified strategic planning and systematic execution lead to the poor cooperation between the back supporting department and the front medical department. Also, the medical staffs have no interest in other work except their duties since the operation mode is focused on serving the medical team.

5. Marketing

American-Sino's marketing is in the start stage. The marketing department is exploring to find the best and suitable marketing strategies for the high-end women's and children's market in Shanghai. Based on its

resources and market characteristics, American-Sino has had promotion activities with gold and silver card. Through cooperating with foreign partners and other partners in the same area, American-Sino has held marketing promotion activities, i.e. parent-child activities and parenting lectures etc. In addition, on-line consultation service is also provided, and the marketing department is responsible for part of web maintenance, information spread and new service promotion, for example, the service of postpartum rehabilitation. However, the lack of clear market strategy makes the marketing department only carry out the basic marketing and hold brand publicity activities. There is a long to go in the areas of public relations and crisis management. Also, the online service is only for basic service introduction and consultation. The online appointment, online transaction and specialized medical consultation are not available.

6. Human Resources

The Human Resources Department is committed to employing and reserving a certain number of personnel with specific skills, knowledge and capacity. According to the needs of business development, American-Sino has made plans of human resources allocation and budgeting with reserves of talents. As for training, professional training of all kinds of posts could be provided by its internal full-time training specialists and external experts. Training includes orientation, law, customer behavior, language, management and

medical professional training.

Performance appraisal system centralizing work responsibility is established.

The performance percentage of work responsibility is 90% while attendance and work error is 10%. Additionally, a staff will be penalized with a salary reduction approximating to 10% of the total loss amount for his/her work mistakes/negligence.

7. IT System

American-Sino's IT system is especially typical among Chinese small-and medium-enterprises. It has basic internal network, the most simple financial software and single-functional website. This year, American-Sino is going to build a high-speed enterprise web and HIS system.

8. Statistics Report

1. Hospital Bed Utilization
80.3%
2. Neonatal Mortality Rate
0%
3. Market Share
0.4%
4. Financial Data Statistics

Annual Revenue of American-Sino (Currency: RMB)

Sales Revenue	2010 Year	2011 Year	Increased Revenue	Increased Rate
Total	66,528,171.47	83,054,633.00	16,526,462.00	24.8%

Monthly Net Profit of American-Sino (Currency: RMB)

Net Profit	2010 Year	2011 Year	Increased Profit	Increased Rate
January	764,420.78	1,199,032.32	434,611.54	57%
February	647,686.46	727,333.84	79,647.38	12%
March	1,405,288.94	1,129,422.13	-275,866.81	-20%
April	933,072.74	2,468,724.65	1,535,651.91	165%
May	885,860.17	1,965,078.14	1,079,217.97	122%
June	812,950.30	425,681.84	-387,268.46	-48%
July	1,067,246.01	1,687,092.08	619,846.07	58%
August	1,442,757.46	1,440,353.03	-2,404.43	0%
September	952,415.65	2,087,137.62	1,134,721.97	119%
October	1,679,125.88	1,127,675.95	-551,449.93	-33%
November	1,676,680.65	434,482.62	-1,242,198.03	-74%
December	502,303.54	1,418,423.55	916,120.01	182%
Total	12,769,808.58	16,110,437.77	3,340,629.19	26%

Outpatient Number of American-Sino (Unit: Person-time)

Outpatient Number	2010 Year	2011 Year	Increased Number	Increased Rate
January	1,669	2,204	535	32%
February	1,320	1,662	342	26%
March	2,046	2,347	301	15%
April	1,991	2,361	370	19%
May	1,959	2,404	445	23%
June	2,027	2,266	239	12%
July	2,098	2,010	-88	-4%
August	1,900	2,049	149	8%
September	2,041	2,237	196	10%
October	2,026	2,568	542	27%
November	2,328	2,748	420	18%
December	2,272	2,698	426	19%
Total	23,677	27,554	3,877	16%

Delivery Number of American-Sino (Unit: Person):

Delivery Number	2010 Year	2011 Year	Increased Number	Increased Rate
January	33	44	11	33%
February	32	44	12	38%
March	51	44	-7	-14%
April	37	56	19	51%
May	32	45	13	41%
June	35	51	16	46%
July	41	54	13	32%
August	42	49	7	17%
September	47	53	6	13%
October	44	56	12	27%
November	55	52	-3	-5%
December	50	70	20	40%
Total	499	618	119	24%

10.2 Appendix-2 – Detailed Financial forecast for the Business plan

Projected Income statement 2012-2017

Income statement					Forecast			
Years	2010	2011	2012	2013	2014	2015	2016	2017
Revenue	66528171	83054633	112954301	141192876	182138810	262279886	346209449	408527150
Cost of sales	42415448	58097251	91327096.4	105894657	134782719	194087116	256194992	285969005
Gross profit	24112723	24957382	21627204	35298219	47356090	68192770	90014457	122558145
Distribution expenses	223469	928533	1355452	2117893	1821388	2622799	3462094	4085272
Administration expenses	2998551	3847326	17391795.6	109979489	41756770	49129749	56851269	62584498
Operating profit	20890703	20181522	2879957	-76799163	3777932	16440222	29701093	55888376
Interest payable	398975	597451	848118	779520	1005581	1448037	1911409	2255462
other expenses (Gov. regulatory fees)	3443646	693428	1129543	1411929	1821388	2622799	3462094	4085272
Profit before taxation	17048082	18890643	902296	-78990612	950963	12369386	24327590	49547642
Taxation	4262020	2780205	135344.359	0	142644	1855408	3649138	7432146
Profit for the year	12786062	16110438	766951	-78990612	808318	10513978	20678451	42115495

Projected Statement of Financial positions 2012-2017

Statements of financial position	Forecast							
	2010	2011	2012	2013	2014	2015	2016	2017
	RMB	RMB	RMB	RMB	RMB	RMB	RMB	RMB
Assets								
Non-current assets								
Property, plant and equipment	4516786	4656231	5656231	29656231	29656231	29656231	29656231	29656231
Current assets								
Cash at bank and in hand	6834182	18295852						8927248
Inventories								
Trade receivables	205931	969099						
Pre-payments	330032	698296						
Other receivables	24605726	33439599						
	31975871	53402847	72627871.5	90784839	117112443	168641918	222607331	271603899
Total assets	36492656	58059078	78284103	120441070	146768674	198298149	252263562	301260130
Equity and liabilities								
Current liabilities								
Trade payables	22241	11800						
Pre-receivables (Health cards)	8252245	11672975						
Other payables	50621	71931						
Taxation	381486	715620						
	8706593	12472326	16962363	15590407	20111625	28960741	38228178	45109250
Equity								
Share capital	15000000	15000000	15000000	29968036	152487572	173485639	205652021	228536202
Share premium (Capital surplus)		1690251						
Cumulative Retained earning	12786062	28896501	31353704	-47636909	-46828591	-36314613	-15636161	27614678
	27786062	45586752	46353704	-17668873	105658981	137171027	190015859	256150880
Total equity and liabilities less additional investments required	36492656	58059078	63316067	-2078466	125770607	166131767	228244037	301260130
Funding required			14968036	122519536	20998067	32166381	24019525	0
Total equity and liabilities	36492656	58059078	78284103	120441070	146768674	198298149	252263562	301260130